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Re: Request for Continued Examination

U.S. Utility Patent Application No. 10/697,370 for

"Gas Turbine Vane with Integral Cooling Flow Control System"

Art Unit: 3745

Examiner: Verdier, Christopher M. Our Ref. No.: 2003P13685US

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(WP257513;1)

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PTO/SB/17 (10-03)
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FEE TRANSMITTAL for FY 2004 Effective 10/01/2003. Patent focs are subject to ennual revision.			Complete if Known							
			Application Number				10/697,370			
			Filing Date				October 30, 2003			
			First Named Inventor				Liang, George			
			Examiner Name			Verdier, Christopher M.				
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 3			3745				
TOTAL AMOUNT OF PAYMENT (\$) 1,240.00	Attorney Docket No.				o. 2	2003P13685US				
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)								
Check Credit card Money Other None	3. ADDITIONAL FEES									
Deposit Accounts	Large Entity Small Entity Fee Description									
Deposit Account 50-0951	Cod	Code (\$) Code (\$)							Fee Paid	
Number	105		2051 2052		Surcharge - late filing fee or oath Surcharge - late provisional filing fee or					
Deposit Account Name Akerman Senterfitt	1052				cover 8	heet				
The Director is authorized to: (check all that apply)	1053 1813		1053 1812			nglish spe o a reque		examination		
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to the above-identified deposit account.	1				Exami	ner action				
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1003 530 2003 265 Plant filing fee	140	2 330	2402	165	Filing a	a brief in s	support of an app	peal		
1004 770 2004 385 Relssue filing fee	140	3 290	2403	145	Reque	st for oral	hearing			
1005 160 2005 80 Provisional filing fee	145	1,510	1451	1,510	Petition	n to institu	rte a public usa p	proceeding		
SUBTOTAL (1) (\$) 0.00	145	2 110	2452	55	Petition	n to revive	e - unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		3 1,330	2453				e - unintentional			
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Claims Multiple Dependent	180		1807				under 37 CFR 1	,17(g)		
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1202 18 2202 9 Claims in excess of 20	180		2809		brober	ry (umes	numbor of prope sion after final rej	rues)		
1201 86 2201 43 Independent claims in excess of 3					(37 Č	FR 1,129((a))			
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 *** Reissue independent claims	181	0 770	2810		exami	ined (37 C	onal invention to FR 1.129(b))		700 00	
over original patent	180		2801		•		ntinu ed Exami n medited examina		790.00	
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**Or number previously paid, if greater: For Reissuos, See above *Reduced by Basic Filing Fee Paid SUBTO							UBTOTAL (3)	(\$) 1,24	0.00	
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Name (Агилтуры) Michael K. Dixon		Registration No. 46,555					Telephone 561.653.5000			
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